

CATERING AUTHORITY / TYPE 222

State From 50184 (6-01) State Excise Police

INSTRUCTIONS:

1. Applicant must complete all requested information.

2. Please type or print clearly.

Name of permittee (as it appears on your Indiana Alcoholic Beverage Permit)

Send, deliver, mail, or fax to:

District #1 Evergreen Park Business Center District #4

1712 U.S. Highway 20 Michigan City, IN 46360 651 S. Frontage Rd Seymour, IN 47274 Fax: 812-522-5681

Michigan City, IN 46360 Fax: 812-522-568' Fax: 219-872-0428

District #2 576 Geiger Dr. Suite E

Roanoke, IN 46783 Fax: 219-672-2321 District #5 1621 Willow St

Vincennes, IN 47591 Fax: 812-882-1386

District #3 35 Executive Dr. Suite #4

Lafayette, IN 47905 Fax: 765-447-7310 District #6

Permit Number

6979 Corporate Circle Indianapolis, IN 46278

Fax: 317-293-9112

Address (number and street, city, state, ZIP code)		Expiration date	e (month, day, year)		
Printed name of contact person for permit	Facsimile number for return of approval	Emergency cor	ntact telephone number		
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Printed name of contact person of event	Employee permit number	Emergency cou) ntact telephone number		
Timed hame of contact person of event	Employee permit number	()		
	N (A SEPARATE REQUEST MUS	T BE SUBMITTED FOR EACH	EVENT)		
Beginning Ending					
Day Date Day	Date	To include Sunday	Does not include Sunday		
Times of catered function: AM	AM Sunday event tim	nes (if applicable) AM	AM		
Start PM	PM Start	PM End	PM		
Type or description of event	<u> </u>				
Exact address of event (number and street, city, state, ZIP code	*)				
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	STEP 3. FLOOR PLAN (SEE STE	P / #2\			
	STEP 3.1 EGGINT EAR (SEE STE	1 4, #2			

STEP 1. PERMITTEE INFORMATION

DBA

STEP 4. ACKNOWLEDGEMENT

The following are guidelines for the approval of an event catered by a supplemental caterers permit:

- 1. The exact address of the proposed catered event must be disclosed upon the application form.
- 2. A floor plan of the designated licensed premises must be submitted along with the application form. There must be a well-defined premises, i.e., a building, a tent, an enclosure, a fenced in area, or a roped off area. The exact area from which the alcoholic beverages shall be dispensed must be listed on the floor plan. Areas where minors will be present must be so designated on the plans. No minors shall be allowed within the area where alcoholic beverages are dispensed. (Complete Step 3)
- 3. Consumption of alcoholic beverages shall take place on the licensed premises only. There shall be no carry-out privileges.
- Each applicant shall designate an individual responsible for the event. Such person shall possess an employee's permit and shall be available to the Excise Police during the event.
- An Excise Officer has the authority to revoke approval of a catered event before or during the event for blatant or persistent violations of laws or regulations.
- 6. The event must meet applicable Department of Health sanitation requirements, particularly with regard to restroom facilities.
- 7. All applications should be received a full fifteen (15) days prior to the event.
- 8. If the catered event is open to the public, the applicant shall notify the local law enforcement agency responsible for the area in which the catered function will be held. The Excise Police may ask for proof of notification to local police which may be demonstrated by a copy of a letter, a "log" entry by the police department, or other means deemed as an appropriate authentication.
- The wholesaler servicing a supplemental caterer may deliver the alcoholic beverages directly to the location of the catered event if the supplemental caterer has his letter of authority posted at that location.
- 10. A supplemental caterers permit is to be used for a specific off premises function or event and not for a permittee to use any adjoining or remote facilities to enlarge or enhance his own business enterprises.
- 11. Have you?

Completed Step 3, a drawing of your proposed floor plans?

Read and signed the catering guidelines?

Is this event or function open to the public?

If this event or function is open to the public, you must notify local law
enforcement agencies of your intent to cater this event, have you done so?

Name of law enforcement agency notified	Name of law enforcement agency notified

Note:

Please post your approved request in a conspicuous place where the alcoholic beverages are being dispensed at the catered location.

If for any reason this request is denied, you may be notified either in person or by phone, and you will be notified by registered mail. (IC 7.1-3-9.5-2)

I swear or affirm under penalties of perjury that the information is true and accurate.

Signature of permittee / agent (Your signature acknowledges that you have read the rules and	Date (month, day, year)
guidelines and that you agree to abide by those rules and guidelines.)	

STEP 5. PAYMENT

Each event is \$5.00. The Commission will bill the permit holder quarterly. Do not send money.

FOR DISTRICT USE ONLY				
District number	Date issued (month, day, year)			
Reviewed by (must be signed by district lieutenant or sergeant)				
	Approved	Denied		